

BETHEL PARK SCHOOL DISTRICT FACILITY REQUEST FORM

EXCEPT FOR SIGNATURES, PRINT OR TYPE ALL INFORMATION

SITE OF REQUESTED FACILITY _____ LOCATION _____

PURPOSE FOR USE _____

SPECIFIC DATES REQUESTED _____

HOURS: FROM _____ TO _____

(Please use reverse of this form if additional dates and times are being requested)

NAME OF APPLICANT _____ PHONE _____

ADDRESS _____ E-MAIL _____

REPRESENTING WHAT GROUP/ORGANIZATION? _____

ANTICIPATED NUMBER OF: PARTICIPANTS _____ SPECTATORS _____

PERCENT OF PARTICIPANTS FROM BETHEL PARK _____

a. ARE YOU CHARGING A FEE? YES NO b. ARE YOU CHARGING ADMISSION? YES NO

LIST ANY ADDITIONAL INFORMATION, COMMENTS, REQUESTS, EQUIPMENT, NEEDS, BELOW:

I AM PROVIDING A CERTIFICATE OF LIABILITY INSURANCE AS INDICATED IN THE AGREEMENT. I HAVE READ THE PROCEDURES, REGULATIONS AND GENERAL INFORMATION AND INFORMATION ON FEES FOR THE USE OF SCHOOL DISTRICT FACILITIES. I UNDERSTAND THEM AND HEREBY AGREE TO OBEY AND BE BOUND BY THEM. REV. 5/23/13

SIGNATURE OF APPLICANT _____ DATE _____

THIS FORM, PROPERLY SIGNED BELOW WILL SERVE AS YOUR PERMIT FOR THE FACILITY REQUESTED. BE PREPARED TO SHOW IT TO THE CUSTODIAN OR OTHER SCHOOL DISTRICT EMPLOYEE. YOU WILL BE BILLED FOR THE TOTAL WHEN ALL COSTS HAVE BEEN DETERMINED. BALANCE DUE UPON RECEIPT.
ESTIMATED COST:

RENTAL FEE	\$ _____	_____	DATE _____
		BUILDING PRINCIPAL SIGNATURE	
CUSTODIAL	\$ _____	_____	DATE _____
		ATHLETIC DIRECTOR	
TECHNICIAN	\$ _____	_____	
STAGE CREW	\$ _____	_____	DATE _____
		MAINTENANCE SUPERVISOR	
SECURITY	\$ _____	_____	
TOTAL	\$ _____	_____	DATE _____
		CENTRAL OFFICE ADMINISTRATION	

LIFE GUARD/INSURANCE CERTIFICATE RECEIVED _____

REQUEST: APPROVED DENIED DATE: _____

MAKE CHECKS PAYABLE TO: BETHEL PARK SCHOOL DISTRICT, AND SUBMIT TO
BUSINESS OFFICE, BETHEL PARK SCHOOLS, 301 CHURCH ROAD, BETHEL PARK, PA 15102.

BETHEL PARK SCHOOL DISTRICT FACILITY REQUEST FORM
ADDITIONAL REQUEST DATES

DATE: _____

FROM: _____

TO _____

DATE: _____

FROM: _____

TO _____

DATE: _____

FROM: _____

TO _____

DATE: _____

FROM: _____

TO _____

DATE: _____

FROM: _____

TO _____

DATE: _____

FROM: _____

TO _____

DATE: _____

FROM: _____

TO _____

DATE: _____

FROM: _____

TO _____

DATE: _____

FROM: _____

TO _____

DATE: _____

FROM: _____

TO _____